

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	10/2/01
FORMALITY REVIEW	my	920	10-18-01
RESPONSE FORMALITY REVIEW	ds	861	12-11-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	7/20/03
2	7/20/03
3	7/20/03
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Claim	Date
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If more than 150 claims or 10 actions  
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364/920

9/2/01  
12-11-01